PTO/SE/06 (08/03)
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PATENT APPLICATION FEE DETERMINATION RECORD								Applicati	_	72
Substitute for Form PTO-875										
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)						SMALL E	NTITY	OR	OTHER	
	FOR				A EXTRA	RATE	FEE		RATE	FEE
	FEE FR 1.16(a))		NO-DERIVES.				s	OR		<u> </u>
	AL CLAIMS FR 1.16(c))		minus 20	• •		x 5 = ·		OR	x 5 e	
	PEHDENT CLAD FR 1.16(b))	I\$	minus 3 ·			x3•		OR	× 5 •	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					٠,٠_٠		OR	+5		
" If the difference in column 1 is less than zero, enter "O" in column 2.						TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										
	. (Column 1) (Column 2) (Column 3)					SMALL I	NTITY	OR	OTHER SMALL	ENTITY
Y Y	7 28 03	CLAIMS REMAINING AFTER AMENOMENT	·	NIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDH TIONAL FEE
ENDMENT	Total (3) (5) R. U.O.S	(5)	Minus	24	• /	x. <u>25</u> .		OR	x. <u>50</u> .	
S	Independent QI CFR 1.1600	2	Minus	ها	•/	x s 100=	·	OR	x,200	
AM		ATION OF MARTIPLE	E DEPENDE	HTCLAN (37 CF	R 1.16(4))	1.180		OR	1.30	
						TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	
(Column 1) (Column 2) (Column 3)										
8 1	2160	(Column 1) CLABAS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		, RATE	ADDI- TIONAL FEE
Ę	Total	AMENDMENT	Minus	- TY	·	25		GR GR	×.50.	
Š	C/ CPR L14000 Independent	. 4	Minus	-00	-	x : 100-		OR	.,200.	
AMENDMENT	OF CHILD				1 1 1 SECTION 1	180			360	
REST PRESENTATION OF MULTIPLE DEPENDENT CLASS (37 CFR 1.16(4))						TOTAL ADD'L FEE		OR	TOTAL ADDL FEE	
(1-6-60 (Codumn 1) (Cotumn 2) (Cotumn 3)										
O E		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENT	Total	AMENDMENT	Mênus	20	- 0	x,25.	/	OR	x,50.	
AMENDM	Independent (17 CFII 1.16(N)	1· 1	Minus		1.0	x 3 100	1	OR.	×,200	/_
AME	PRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (3) CFR 1.16(0))					180.		OR	. 300.	/
						TOTAL ADOL FEE		OR	ADO'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" bit THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" bit THIS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For" bit THIS SPACE is less than 3, enter "20".										

"If the "righest Number Previously Paid For" IN THIS SPACE IS sets than 3, exert "3.

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of Islamation is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.16. This collection is estimated to late 12 minutes to complete the information of the USPTO. Time will vary depending upon the individual case, Any comments including gathering, preparing, and submitting the complete displication form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Oppartment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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